

MEMBER INFORMATION UPDATE FORM

C&WJCCU is continually working to improve its communication with its members. By updating our member information database, we will be able to contact you with the latest updates on the Credit Union, its products and services.

Please complete and return this form along with a copy of your proof of change in information

BRANCH:		
MEMBER NUMBER*:		
NAME*:	(First, Middle, Last)	
DATE OF BIRTH*:(dd/mm/yyyy)	PLACE OF BIRTH*:	
RESIDENTIAL ADDRESS*:		
MAILING ADDRESS (If different from residenti	ial address):	
TEL*: (Home)	(Cell)	(Other)
OCCUPATION:		
NAME & ADDRESS OF BUSINESS/EMPLOY	ÆR:	
EMAIL: (Business)	(Personal)	(Other)
Proof of Address attached: □Utility Bill □Postma	arked Envelope	ns. \square Other
I would like to receive regular updates via: □Em	ail □Text □Regular Mail □All Three	
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SELF-CERTIFICATION	OF RESIDENCY (required for Common	Reporting Standard)*
	opriate. oses, not a resident of any other country except Jamaic oses, resident in the following countries (indicate the ta	
Country/countries of tax residency	Tax reference type (eg. TRN, SSN, TIN)	Tax reference number
Signature of Member:	Date:	
C&WJCCUL Member Information Update Form Last Updated March 8, 2022		